

**BEST AVAILABLE COPY**

**CLAIMS ONLY**

Application Number

10-802698

**Filing Date**

Print Date 7-1-05

**Applicant(s)**

\* May be used for additional claims or amendments.

CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT		May be used for additional claims or amendments					
	Indep.	Depend.	Indep.	Depend.	Indep.	Depend.	Indep.	Depend.	Indep.	Depend.	Indep.	Depend.
1							51					
2							52					
3							53					
4							54					
5							55					
6							56					
7							57					
8							58					
9							59					
10							60					
11							61					
12	1						62					
13		1					63					
14		1					64					
15		1					65					
16		1					66					
17	1						67					
18		1					68					
19		1					69					
20	1						70					
21							71					
22							72					
23							73					
24							74					
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27							77					
28							78					
29							79					
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37							87					
38							88					
39							89					
40							90					
41							91					
42							92					
43							93					
44							94					
45							95					
46							96					
47							97					
48							98					
49							99					
50							100					
Total Indep	4						Total Indep					
Total Depend	5						Total Depend					
Total Claims	9						Total Claims					